

Department of Veterans Affairs
Veterans Health Administration
Washington, DC 20420

M-2, Part VI
Chapter 15

March 14, 1994

1. Transmitted is a new chapter to Department of Veterans Affairs, Veterans Health Administration Manual M-2, "Clinical Programs," Part VI, "Pathology and Laboratory Medicine Service," Chapter 15, "Environmental and Safety Issues in the Laboratory."

2. Principal changes are:

- a. Paragraph 15.01: Describes the purpose of this chapter;
- b. Paragraph 15.02: Establishes policy for laboratory safety programs;
- c. Paragraph 15.03: States the authority for laboratory safety programs;
and
- d. Paragraph 15.04: Establishes operational criteria for laboratory safety programs.

3. Filing Instructions

Remove pages

Insert pages

15-i through 15-ii

15-1 through 15-3

4. RESCISSIONS: VHA Circulars: 10-76-219, 10-76-243, 10-77-024, 10-79-133, and 10-88-085.

~~S/3/14/94 by Dennis Smith for~~
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Acting Under Secretary for Health

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RESCISSIONS

The following material is rescinded:

1. Circulars

10-76-219
10-76-243
10-77-024
10-79-133
10-88-085

CHAPTER 15. ENVIRONMENTAL AND SAFETY ISSUES IN THE LABORATORY

15.01 PURPOSE

The purpose of this chapter is to establish laboratory safety guidelines in accordance with the Department of Veterans Affairs (VA) Occupational Safety and Health (OSH) Program.

15.02 POLICY

VA policy dictates that each Laboratory must maintain a safe and healthful work environment for employees through the:

- a. Elimination of safety and health hazards, and
- b. Development of safe work practices.

15.03 AUTHORITY

The VA OSH Program requires that all hazards (including those found in diagnostic laboratories) at Veterans Health Administration (VHA) facilities be addressed by written programs.

a. The Occupational Safety and Health Administration (OSHA) Standards, such as 29 Code of Federal Regulations (CFR) 1910.1450, require that all laboratories comply with the requirements detailed therein.

b. The Clinical Laboratory Improvement Amendments of 1988 to Public Law 100-578 (CLIA 88) requires that the physical plant and environment conditions of the Laboratory provide a safe environment and protect employees from physical, chemical, and biological hazards.

15.04. LABORATORY SAFETY PROGRAM

a. Written Safety Program. Each VHA Pathology Laboratory must prepare and implement a written Safety Program, specific to that Laboratory. This program must:

(1) Be reviewed by the facility or regional Industrial Hygienist and be approved by the facility Director.

(2) Address administrative procedures related to OSH (such as emergency response, etc.) for the Laboratory and the requirements for:

- (a) Chemical Hygiene Plans contained in 29 CFR 1910.1450 and Appendix A,
- (b) The facility's Comprehensive Baseline Industrial Hygiene Survey, and
- (c) The facility's Exposure Control Plans.

b. Laboratory Safety Officer. Each VHA Pathology Laboratory must designate a Laboratory Safety Officer to coordinate the Laboratory Safety Program and related issues.

c. Laboratory Safety Subcommittee. A subcommittee of the facility OSH Committee should be established to address Laboratory safety issues, if these issues have not been addressed by the medical center's Safety Program. The subcommittee should periodically report its progress and achievements to the OSH Committee. This subcommittee should:

(1) Consist of the:

- (a) Laboratory Safety Officer (chairperson),
- (b) Facility Safety Officer and/or Industrial Hygienist,
- (c) Radiation Safety Officer,
- (d) Infection Control Officer, and
- (e) Representative of Environmental Management Service.

(2) Address Laboratory safety issues that impact organizations represented by members of the committee, and

(3) Coordinate development of any policies and procedures required by the implementation of the Laboratory Safety Program.

d. Written Work Procedures

(1) Any hazardous chemical, biological agent, or physical agent located in Pathology and Laboratory Medicine Service must have written safe handling storage, and disposal procedures. These procedures must:

(1) Comply with the procedures established for the medical center and all applicable OSH requirements.

(2) Be provided to:

- (a) Employees working with the hazardous chemical or agent,
- (b) The Laboratory Safety Officer,
- (c) The facility Industrial Hygienist, and
- (d) The regional Industrial Hygienist.

(3) Be the basis for train provided to Laboratory personnel.

(4) Address all biosafety hazards in the Laboratory.

(2) Handling of body fluids and other related samples of patients suspected of being infected with biosafety level 4 agents must be prohibited, until the patient has been evaluated by representatives of the Center for Disease Control. NOTE: These patients should be quarantined by the medical center.

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e. Modifications to the Laboratory

(1) All modifications to Laboratory space, ventilation systems serving Laboratory space, changes to fume hood design, etc. must be reviewed by the Laboratory Safety Officer, the facility Industrial Hygienist, and the regional Industrial Hygienist.

(2) All resulting comments must be addressed in accordance with the requirements of the VA OSH Program.

(3) The regional Industrial Hygienist is required to determine that new or existing engineering controls at individual facilities have been validated appropriately.

f. Laboratory Equipment. All Laboratory equipment must be installed, maintained, and operated in accordance with the manufacturer's guidance and applicable OSH requirements.

g. Training. All employees assigned to Pathology and Laboratory Medicine Service must receive laboratory safety training in accordance with the VA OSH Program, the Laboratory Safety Program, and applicable OSHA requirements.